

LLC-12

FILED Secretary of State

IMPORTANT — Read instructions before completing this form. Filing Fee -\$20.00			State of California JUL 0 5 2016			
	This Space	For Office Use	Only	·		
Precision Development, LLC						
12-Digit Secretary of State File Number 201612010500	3. St	ate or Place of Organ	ization (only if formed ou	tside of Californ	ia)	
4. Business Addresses						
Street Address of Principal Office - Do not list a P.O. Box		City (no abbreviations)		State	1 1 1	
Southside Drive, Suite 228		Clifton Park -		NY	120	
b. Meiling Address of LLC, if different than item 4a		City (no abbreviations)		State	Zip	Code
c. Street Address of California Office, if Item 4a is not in California - Do not list a P.O. Box		City (no abbreviations)		State		Code
9454 Wilshire Blvd., Suite 920		Beverly Hills			902	212
5. Manager(s) or Member(s) If no managers have been appointed a be listed. Attach additional pages, if ne		provide the name and add	dress of each <i>member</i> . At lea	ast one name and	addres	s must
a. First Name Clare		Middle Name	Last Name Bronfman			Suffix
b. Address 5 Southside Drive, Suite 228		City (no abbreviations) Clifton Park		State NY	2ip 1	Code 065
6. Agent for Service of Process agent's name and California address			California and Item 6a and 6t	must be complet		
			nia Registered Corporate Ag n 6c must be completed (leav	ent, a current ago		tration
a. California Agent's First Name (if agent is not a corporation) Barbara				ent, a current ago		stration Suffix
certificate must be on file with the C a. California Agent's First Name (if agent is not a corporation)	California S	ecretary of State and Item	6c must be completed (leav Last Name	ent, a current ago	Zip	
certificate must be on file with the C a. California Agent's First Name (if agent is not a corporation) Barbara b. Street Address (if agent is not a corporation) - Do not list a P.O. Box	California S	ecretary of State and Item Middle Name City (no abbreviations) Beverly Hills	6c must be completed (leav Last Name	ent, a current ago e Item 6a-6b blant State	Zip	Suffix Code
certificate must be on file with the C a. California Agent's First Name (if agent is not a corporation) Barbara b. Street Address (if agent is not a corporation) - Do not list a P.O. Box 9454 Wilshire Blvd., Suite 920	California S	ecretary of State and Item Middle Name City (no abbreviations) Beverly Hills	6c must be completed (leav Last Name	ent, a current ago e Item 6a-6b blant State	Zip	Suffix Code
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